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## TELECOPY/FACSIMILE

To: Company:  
Brian J Sines, Examiner USPTO  
Art Unit 1743Fax Number:  
+1.571.273.8300

Tel Number:

From: Barry M. Shuman/Wei-Ning Yang

Date: June 28, 2006

Time:

Total number of pages incl. cover page: 13

## For internal purposes only:

Client number: 81841.0155

Attorney billing number: 6085

Confirmation number: Return Fax to Diane Zynn

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## MESSAGE:

RE: U.S. Patent Application Serial No.: 09/915,865, Our Ref. 81841.0155

I hereby certify that the following documents:

- Request for Continued Examination (RCE)
- Amendment Under 37 C.F.R. 1.114
- Amendment Transmittal
- Petition for Extension of Time (2 months)

are being facsimile transmitted to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22314-1450, for filing in the above application.

June 28, 2006  
Date of Deposit  
Diane Zynn

FORM PT(0)-1083

Patent Application No. 09/915,865  
Attorney Docket No. 2009-174 (81841.0155)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re application of:

Richard R. Sharpe, Jr. et al.

Serial No: 09/915,865

Filed: July 26, 2001

For: METHOD AND APPARATUS FOR OBJECT-ORIENTED REAL-TIME MECHANICAL CONTROL OF AUTOMATED CHEMISTRY INSTRUMENTS

Art Unit: 1743

Examiner: Brian J. Sines

JUN 28 2006

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	7	-	26	**	0	LG=\$50 SM=\$25	\$0	\$ 0
INDEPENDENT CLAIMS FEE	1	-	4	***	0	LG=\$200 SM=\$100	\$0	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS						LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180		\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)						\$250 FOR EACH ADDITIONAL 50 SHEETS		\$ 0
Independent Claims: 7						TOTAL		\$ 0

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge the fee of \$\_\_ for the additional claim fees to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ Please charge the fee of \$450 for the 2-month extension of time to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,

HOGAN & HARTSON LLP

By: Barry M. Shuman  
Wei-Ning Yang (Contact Person)  
Registration No. 38,690  
Attorney for Applicant(s)  
Barry M. Shuman  
Registration No. 50,220

Date: June 28, 2006

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FORM PTO-1083

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Commissioner for Patents  
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Name

Signature

06/28/06  
Date

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By:

Wei-Ning Yang (Contact Person)  
Registration No. 38,690  
Attorney for Applicant(s)  
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